

FOR INSTRUCTIONS, SEE BACK OF FORM  
This form is not applicable to statutory political committees.

## Notice of Dissolution

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution.

JAN 7 2003

FORM DR-3  
(Rev. 02/98)  
**NOTICE OF DISSOLUTION**

**For Office Use Only**

Comm. # 11067-A

Audited ☒

Computer sb

Certified Date of Dissolution \_\_\_\_\_

### COMMITTEE NAME

Official Name of Committee  
Ambrosion for School Board

Street  
209 South 26<sup>th</sup> Street

City, State, Zip Code  
West Des Moines, Iowa 50265

Area Code Telephone  
515, 223-5771

Effective date of dissolution:

12/31, 19 02

Cynthia A. Ambrosion  
Signature of Treasurer

December 31, 2002  
Date Signed

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with my committee's last filed Statement of Organization.

[Signature]  
Signature of Candidate - Required for Candidate's Committee

12/31/02  
Date signed

### WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached.